

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	JW	32	10/16
FORMALITY REVIEW	F.A	(587)	10/08/01
RESPONSE FORMALITY REVIEW	SG	1077	3/20/02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	10/16
2	✓	✓	10/16
3	✓	✓	10/16
4	✓	✓	10/16
5	✓	✓	10/16
6	✓	✓	10/16
7	✓	✓	10/16
8	✓	✓	10/16
9	✓	✓	10/16
10	✓	✓	10/16
11	✓	✓	10/16
12	✓	✓	10/16
13	✓	✓	10/16
14	✓	✓	10/16
15	✓	✓	10/16
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18	✓	✓	10/16
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25	✓	✓	10/16
26	✓	✓	10/16
27	✓	✓	10/16
28	✓	✓	10/16
29	✓	✓	10/16
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31	✓	✓	10/16
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46	✓	✓	10/16
47	✓	✓	10/16
48	✓	✓	10/16
49	✓	✓	10/16
50	✓	✓	10/16

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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227  
11/18  
875  
3/20/02